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APPLICANTS

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** CONTINUING DATA *****

None

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** FOREIGN APPLICATIONS *****

None

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IF REQUIRED, FOREIGN FILING LICENSE
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Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NY	SHEETS DRAWING 5	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	Initials			
Verified and Acknowledged	Examiner's Signature				

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